

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND																																																																	
1 Date of Request: <u>6/6/05</u>		2 Serial/Patent # <u>10/518154</u>																																																															
3 Please refund the following fee(s): <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr><td style="width: 10%;"></td><td style="width: 40%;">Filing</td><td style="width: 10%;">4 PAPER NUMBER</td><td style="width: 10%;">5 DATE FILED</td><td style="width: 30%;">6 AMOUNT</td></tr> <tr><td></td><td>Amendment</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Extension of Time</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Notice of Appeal/Appeal</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Petition</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Issue</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Cert of Correction/Terminal Disc.</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Maintenance</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Assignment</td><td></td><td></td><td>\$</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Other <u>Search fee adjustment</u></td><td></td><td></td><td>\$ <u>100</u></td></tr> <tr> <td colspan="4" style="padding: 5px;">7 TOTAL AMOUNT OF REFUND</td> <td style="padding: 5px;">\$ <u>100</u></td> </tr> </table>		Filing	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT		Amendment			\$		Extension of Time			\$		Notice of Appeal/Appeal			\$		Petition			\$		Issue			\$		Cert of Correction/Terminal Disc.			\$		Maintenance			\$		Assignment			\$	<input checked="" type="checkbox"/>	Other <u>Search fee adjustment</u>			\$ <u>100</u>	7 TOTAL AMOUNT OF REFUND				\$ <u>100</u>	8 TO BE REFUNDED BY: <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr><td style="width: 10%;"></td><td style="width: 90%;">Treasury Check</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Credit Deposit A/C #:</td></tr> <tr> <td style="text-align: center; padding: 5px;">9</td> <td style="text-align: center; padding: 5px;"> <div style="border: 1px solid black; display: inline-block; padding: 2px;"> <div style="border: 1px solid black; display: inline-block; padding: 2px;">1</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">6</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">--</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">1</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">3</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">5</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">0</div> </div> </td> </tr> </table>					Treasury Check	<input checked="" type="checkbox"/>	Credit Deposit A/C #:	9	<div style="border: 1px solid black; display: inline-block; padding: 2px;"> <div style="border: 1px solid black; display: inline-block; padding: 2px;">1</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">6</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">--</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">1</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">3</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">5</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">0</div> </div>
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11 REFUND REQUESTED BY:																																																																	
TYPED/PRINTED NAME: <u>Kaya Baltimore</u>		TITLE: _____																																																															
SIGNATURE: <u>[Signature]</u>		PHONE: <u>(703) 308-9140</u>																																																															
OFFICE: <u>CA 202</u>																																																																	
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****																																																																	
APPROVED: _____		DATE: _____																																																															

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: